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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	IZZO, ROSE, , ,										
) Address (number and street)					Candidate's FEC Identification Number H0DE01025					
	c) City, State, and ZIP Code					3. Is This	s Ne	•W		Amended	
	WILMINGTON DE 19810-				0-2851	Staten	nent (N) OR	×	(A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	trict of Candid	date				
	DEMOCRATIC PARTY	House			DE	01					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	Thereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full) IZZO FOR CONGRESS											
	(b) Address (number and street) PO BOX 7673										
	(c) City, State, and ZIP Code										
	WILMINGTON				DE	19803	3				
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.											
NOTE: This designation should be filed with the principal campaign committee.											
(a) Name of Committee (in full)											
(b) Address (number and street)											
(c) City, State, and ZIP Code											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Signature of Candidate Date											
Izzo, Rose, , , [Electro					tronically Filed]	02/10/20	18				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
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FEC FORM 2 (REV. 02/2009)